



PATENT  
Attorney Docket No.: 017516-009700US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

MANZO, SCOTT et al.

Application No.: 10/611,411

Filed: June 30, 2003

For: ELECTRO-SURGICAL  
INSTRUMENT WITH REPLACEABLE  
END-EFFECTORS AND INHIBITED  
SURFACE CONDUCTION

Examiner: Unassigned

Art Unit: 3731

**STATUS REQUEST**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The above-referenced application was filed as a patent application on June 30, 2003. To date, attorneys for applicants have not yet received an Office Action from the United States Patent Office.

Please advise us of the status of this application.

Respectfully submitted,

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60283419 v1



IFW

PTO/SB/21 (04-04)

<b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/611,411
	Filing Date	June 30, 2003
	First Named Inventor	MANZO, SCOTT
	Art Unit	3731
	Examiner Name	Unassigned
Total Number of Pages in This Submission	Attorney Docket Number	017516-009700US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Townsend and Townsend and Crew LLP	
Signature	Nena Bains	Reg. No. 47,400
Date	8/13/04	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Gigi Hoover	
Signature	Gigi Hoover	Date August 13, 2004